

City of Marietta/Board of Lights and Water **Beneficiary Designation Prior to Retirement Retirement Plan 4022**

Name of Employee:				
Employee's Social Security Number:				
Marital Status:				
 Married with spouse as sole beneficiary Single (including widowed, divorced, or legally separated) Married, spouse not sole primary beneficiary (spouse's consent required) 				
In accordance with the retirement podesignate the following beneficiary Article VII:		- · ·	•	
Name:				
Address:				
City	State	ZIP Code		
Relationship:	Date of Birth:			
Social Security Number:				
Signature		Date		
Human Resources Department R	epresentative	 Date		

Spousal Consent:			
I,	, do swear and affirm that I am the legal spouse of		
	, a Participant in the Plan. I hereby acknowledge and		
consent to the beneficiary designa	tion made by my spouse on, which does		
not name me as a beneficiary. I ur	nderstand that, as a result of this consent, I will not be entitled		
to any payment under this Plan. I	further acknowledge that my consent to such designation is		
irrevocable unless my spouse files	s a new Beneficiary Designation Form with the Plan		
Administrator.			
Spouse's Signature:	Date		
Notarization:			
	by		
	(Name of Notary)		
State of	County		
	·		
(Seal)			
Expiration Date:			